

MAR - 1 2012

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Calderon Ronald S.

1. Office, Agency, or Court

Agency Name

CA State Senate

Division, Board, Department, District, if applicable

30th District

Your Position

Senator

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 8

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is
I certify under penalty of perjury under the laws of the State of California that

Date Signed 02/28/2012
(month, day, year)

Signature

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Ron Calderon

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

O'Melveny & Meyers

ADDRESS (Business Address Acceptable)

400 S. Hope Street, Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Law Office

YOUR BUSINESS POSITION

Secretary

GROSS INCOME RECEIVED

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary

☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Partnership

☐ Sale of

(Real property, car, boat, etc.)

☐ Commission or

☐ Rental Income, list each source of \$10,000 or more

☐ Other

(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary

☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Partnership

☐ Sale of

(Real property, car, boat, etc.)

☐ Commission or

☐ Rental Income, list each source of \$10,000 or more

☐ Other

(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

INTEREST RATE

_____ %

☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None

☐ Personal residence

☐ Real Property

Street address

City

☐ Guarantor

☐ Other

(Describe)

Comments:

SCHEDULE D
Income – Gifts

Name
Ron Calderon

► NAME OF SOURCE
Association of CA Life & Health Insurance Co.
ADDRESS (Business Address Acceptable)
1201 K Street, Suite 1820 Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Life & Health Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 21 / 11</u>	<u>\$ 1263.00</u>	<u>**Lodging, Parking,</u>
<u>09 / 22 / 11</u>	<u>\$</u>	<u>Porterage, Reception</u>
<u>09 / 21 / 11</u>	<u>\$ 5.99</u>	<u>Refreshment</u>

► NAME OF SOURCE
Applied Materials
ADDRESS (Business Address Acceptable)
3050 Bowers Ave., Santa Clara CA 95054-3299
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 25 / 11</u>	<u>\$ 983.00</u>	<u>***Accommodations,</u>
<u>/ /</u>	<u>\$</u>	<u>Meals, Reception</u>
<u>07 / 25 / 11</u>	<u>\$ 228.00</u>	<u>Reception</u>

► NAME OF SOURCE
Astellas Pharma US
ADDRESS (Business Address Acceptable)
Three Parkway North, Deerfield, IL 60015
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Pharmaceutical Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 19 / 11</u>	<u>\$ 66.67</u>	<u>Dinner</u>
<u>09 / 14 / 11</u>	<u>\$ 11.87</u>	<u>Dinner</u>
<u>11 / 14 / 11</u>	<u>\$ 27.55</u>	<u>Dinner</u>

► NAME OF SOURCE
Association of CA Life & Health Insurance Co.
ADDRESS (Business Address Acceptable)
1201 K Street, Suite 1820 Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Life & Health Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 17 / 11</u>	<u>\$ 97.67</u>	<u>Dinner</u>
<u>/ /</u>	<u>\$</u>	
<u>/ /</u>	<u>\$</u>	

► NAME OF SOURCE
CA Building Industry Assoc.
ADDRESS (Business Address Acceptable)
1215 K Street, Suite 1200 Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Building Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 26 / 11</u>	<u>\$ 101.62</u>	<u>Leadership Dinner</u>
<u>/ /</u>	<u>\$</u>	
<u>/ /</u>	<u>\$</u>	

► NAME OF SOURCE
BP America Inc
ADDRESS (Business Address Acceptable)
1201 K Street, Suite 1990, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Oil Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 23 / 11</u>	<u>\$ 392.86</u>	<u>2 Concert Tickets</u>
<u>/ /</u>	<u>\$</u>	<u>+Parking</u>
<u>/ /</u>	<u>\$</u>	

Comments: **Transportation, lodging, parking and reception items in connection with candidate's participation in
program not subject to FPPC's gift limits.
*** Meals, accommodations in connection with Clean Energy Legislative Participation not subject to gift
limits.

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Ron Calderon

► NAME OF SOURCE

CA Correctional Peace Officers Assoc.

ADDRESS (Business Address Acceptable)

755 Riverpoint Drive, West Sacramento, CA 95605

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Correctional Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 22 / 11	\$ 1460.00**	Accommodations(2)
07 / 22 / 11	\$ 210.00**	Reception
07 / 23 / 11	\$ 43.00**	Breakfast

► NAME OF SOURCE

CA Correctional Peace Officers Assoc.

ADDRESS (Business Address Acceptable)

755 Riverpoint Drive, West Sacramento, CA 95605

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Correctional Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 23 / 11	\$ 135.00**	Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Coalition for A Safer CA

ADDRESS (Business Address Acceptable)

1020 12th Street, Ste. 408, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 23 / 11	\$ 420.00	Driver & golf glove
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Crime Victims United

ADDRESS (Business Address Acceptable)

1415 L Street, Ste. 410, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 21 / 11	\$ 377.50	Golf
07 / 21 / 11	\$ 54.00**	Lunch
/ /	\$	

► NAME OF SOURCE

Minorities in Law Enforcement

ADDRESS (Business Address Acceptable)

925 L Street, Ste. 850, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 22 / 11	\$ 420.00	Golf
07 / 22 / 11	\$ 56.00**	Lunch
/ /	\$	

► NAME OF SOURCE

PhRMA

ADDRESS (Business Address Acceptable)

1215 K Street, Ste. 970, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Biopharmaceutical Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 23 / 11	\$ 365.00	Bushnell Hybrid
07 / 23 / 11	\$ 34.00	Hat
07 / 23 / 11	\$ 10.00	Divot Tool

Comments: **Accommodation, meals and reception as a participant are not subject to the limits.

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Ron Calderon</u>

► NAME OF SOURCE
Diversity PAC

ADDRESS (Business Address Acceptable)
728 W. Edna Place, Covina, CA 91722

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 11 / 11</u>	<u>\$ 419.60</u>	<u>Airfare</u>
<u>01 / 31 / 11</u>	<u>\$ 620.35**</u>	<u>Lodging</u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Microsoft Corporation

ADDRESS (Business Address Acceptable)
1415 J Street, Ste. 1200, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Online Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 11 / 11</u>	<u>\$ 52.45</u>	<u>Food & beverage</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Massachusetts Mutal Life Ins. Company

ADDRESS (Business Address Acceptable)
Springfield, MA 01111-0001i

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 21 / 11</u>	<u>\$ 248.00</u>	<u>Round of golf</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Farmers Group, Inc.

ADDRESS (Business Address Acceptable)
1201 K Street, Suite 1220, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 29 / 11</u>	<u>\$ 420.00</u>	<u>Meals and beverage</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Syner Med

ADDRESS (Business Address Acceptable)
1200 Corporate Center Dr., #200, Monterey Park, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Healthcare

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 19 / 11</u>	<u>\$ 55.56</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE
Voter Outreach Taking Action

ADDRESS (Business Address Acceptable)
400 Capitol Mall, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 17 / 11</u>	<u>\$ 274.30</u>	<u>iPad</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

Comments: ***Accommodation in connection to a Roundtable event is not subject to the gift limits.

SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Ron Calderon

► NAME OF SOURCE

Personal Insurance Federation of CA

ADDRESS (Business Address Acceptable)

1201 K Street, Ste. 1220, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 23 / 11	\$ 36.00	Spa bag
07 / 23 / 11	\$ 60.00	Wine
07 / 23 / 11	\$ 75.00	Micro Sherpa blanket

► NAME OF SOURCE

CalChamber

ADDRESS (Business Address Acceptable)

1215 K Street, Ste. 1400, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Chamber of Commerce

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 08 / 11	\$ 23.00	Lunch
03 / 08 / 11	\$ 34.50	Lunch
/ /	\$	

► NAME OF SOURCE

Independent Voter Project

ADDRESS (Business Address Acceptable)

101 West Broadway, Ste. 1460, San Diego, CA 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 13 / 11	\$ 1675.00*	*Accommodations (5)
11 / 18 / 11	\$ 269.40	Receptions
/ /	\$	

► NAME OF SOURCE

Personal Insurance Federation of CA

ADDRESS (Business Address Acceptable)

1201 K Street, Ste. 1220, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 23 / 11	\$ 115.00	Cutter & Buck Jacket
07 / 23 / 11	\$ 125.00	Cutter & Buck Shirt
/ /	\$	

► NAME OF SOURCE

CA Independent Petroleum Assoc.

ADDRESS (Business Address Acceptable)

1112 I Street, Ste. 350, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Oil Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 11 / 11	\$ 314.90**	Lodging
03 / 11 / 11	\$ 240.19**	Dinner & Breakfast
03 / 12 / 11	\$ 314.90	Lodging

► NAME OF SOURCE

CA Independent Petroleum Assoc.

ADDRESS (Business Address Acceptable)

1112 I Street, Ste. 350, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 30 / 11	\$ 676.71**	Lodging, dinner &
/ /	\$	breakfast
/ /	\$	

Comments: **As participant these gifts are not subject to the limits.

SCHEDULE D **Income – Gifts**

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Ron Calderon

▶ NAME OF SOURCE

CA Poultry Federation

ADDRESS (Business Address Acceptable)

4640 Spyres Way, Ste. 4, Modesto, CA 95356

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Non-profit trade association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 08 / 11	\$ 242.71	Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE

CA Tribal Business Alliance

ADDRESS (Business Address Acceptable)

1530 J Street, Ste. 400, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 02 / 11	\$ 145.69	Dinner & lodging
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE

CTIA -The Wireless Association

ADDRESS (Business Address Acceptable)

20 Park Road, Ste. E, Burlingame, CA 94010

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Telecommunication

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 23 / 11	\$ 96.92	Reception
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments:

SCHEDULE D **Income - Gifts**

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>Ron Calderon</u>
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NAME OF SOURCE		
<u>Wal-Mart Stores, Inc.</u>		
ADDRESS (Business Address Acceptable)		
<u>455 Capitol Mall, Ste. 600, Sacramento, CA 95814</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
<u>Retailer Corporation</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 02 / 11</u>	<u>\$ 182.11</u>	<u>Dinner</u>
<u>06 / 13 / 11</u>	<u>\$ 112.15</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u> </u>

NAME OF SOURCE		
<u>PricewaterhouseCooper LLP</u>		
ADDRESS (Business Address Acceptable)		
<u>2350 Kernee Blvd., Ste. 250, San Rafael, CA 94901</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
<u> </u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 03 / 11</u>	<u>\$ 224.07</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

NAME OF SOURCE		
<u> </u>		
ADDRESS (Business Address Acceptable)		
<u> </u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
<u> </u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

NAME OF SOURCE		
<u>Calif. Issues Forms</u>		
ADDRESS (Business Address Acceptable)		
<u>1717 I Street, Sacramento, CA 95811</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
<u>Nonprofit organization</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 31 / 11</u>	<u>\$ 92.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

NAME OF SOURCE		
<u>Prime Healthcare Services</u>		
ADDRESS (Business Address Acceptable)		
<u>3300 E. Guasti Rd., 3rd Floor, Ontario, CA 91761</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
<u>Healthcare</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 14 / 11</u>	<u>\$ 143.62</u>	<u>Golf</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

NAME OF SOURCE		
<u>CA Latino Caucus Leadership PAC</u>		
ADDRESS (Business Address Acceptable)		
<u>400 Capitol Mall, Sacramento, CA 95814</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
<u>Committee</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 21 / 11</u>	<u>\$ 274.30</u>	<u>iPad</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

Comments: